



TFW

| AMENDMENT TRANSMITTAL LETTER | | | Docket No. 0054-0236P | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|-----------------------------------|--------------------------|-------------------|--|--|--|--|--|---|---|-----------------------------------|------|--------------|---|--------|--|---|-----------------------|---|-------|--|---|---|--|--|--|--------------------------|-----------------------------|--|--|--|--|---|--|--|--|------|
| Application No. 09/898,024-Conf. #9286 | | Filing Date July 5, 2001 | Examiner I. N. Moore | Art Unit 2661 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Applicant(s): Toru INADA et al. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Invention: CRYPTOGRAPHIC APPARATUS AND CRYPTOGRAPHIC COMMUNICATION SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th colspan="5">CLAIMS AS AMENDED</th></tr><tr><th></th><th>Claims Remaining After Amendment</th><th>Highest Number Previously Paid</th><th>Number Extra Claims Present</th><th>Rate</th></tr></thead><tbody><tr><td>Total Claims</td><td>6</td><td>- 20 =</td><td></td><td>x</td></tr><tr><td>Independent Claims</td><td>2</td><td>- 3 =</td><td></td><td>x</td></tr><tr><td colspan="4">Multiple Dependent Claims (check if applicable)</td><td><input type="checkbox"/></td></tr><tr><td colspan="4">Other fee (please specify):</td><td></td></tr><tr><td colspan="4">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td><td>0.00</td></tr></tbody></table> | | | | | CLAIMS AS AMENDED | | | | | | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | Total Claims | 6 | - 20 = | | x | Independent Claims | 2 | - 3 = | | x | Multiple Dependent Claims (check if applicable) | | | | <input type="checkbox"/> | Other fee (please specify): | | | | | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | 0.00 |
| CLAIMS AS AMENDED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | 6 | - 20 = | | x | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | 2 | - 3 = | | x | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent Claims (check if applicable) | | | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (please specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ is enclosed. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D. Richard Anderson Attorney Reg. No.: 40,439 BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8035 | | | Dated: <u>June 29, 2006</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |



Docket No.: 0054-0236P
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Toru INADA et al.

Application No.: 09/898,024

Confirmation No.: 9286

Filed: July 5, 2001

Art Unit: 2661

For: CRYPTOGRAPHIC APPARATUS AND
CRYPTOGRAPHIC COMMUNICATION
SYSTEM

Examiner: I. N. Moore

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated April 4, 2006, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Amendments to the Drawings begin on page 7 of this paper and include an attached replacement sheet.

Remarks/Arguments begin on page 8 of this paper.

Application No. 09/898,024
Amendment dated June 29, 2006
Reply to Office Action of April 4, 2006

Docket No.: 0054-0236P

An **Appendix** including amended drawing figures is attached following page 15 of this paper.